

High Cost Secondary Outcome of Opioid Dependence



Innovu identified a 57-year old female spouse receiving treatment for Hepatitis C between August and October of 2017. The full course of her treatment cost \$72,000. Medical claims data revealed two separate encounters for accidental heroin poisoning, in February of 2016 and more recently in June of 2017.

Medical and pharmacy claims also document that this member has been receiving ongoing treatment for opioid dependence for approximately 4 years. Finally, claims data shows multiple treating providers for each of these conditions.

Reviewing the data leads to three key questions:

1. Did long-term opioid dependence despite treatment advance to illicit drug use and a subsequent infection of Hepatitis C?
2. Did the patient disclose or the treating provider for Hepatitis C assess the individual's history of heroin use and opioid dependence?
3. Did the pharmacy benefit manager (PBM) work with the ordering provider for the Hepatitis C therapy to ensure the member was enrolled in a drug treatment program to reduce the risk of reinfection?

While claims data cannot conclusively establish a causal relationship with the infection, the medical profession has identified that the most common way to become infected with Hepatitis C is by sharing contaminated needles and drug paraphernalia used to inject illegal drugs.¹ Based on medical claim records, it is highly possible this member became infected with the virus by using illicit drugs.

The timeline created by the claim records show the member's ongoing struggle with opioid dependence prior to receiving medical treatment for heroin poisoning. Regardless of the actual sequence of events, this case example provides another warning flag for the aggressive treatment of opioid dependence and the need for collaboration between providers and benefit administrators to improve outcomes and manage costs.

Employers can take action to curb opioid dependence in the following ways:

- Structuring benefit programs with affordable, in-network access to drug treatment programs
- Creating a collaborative team with their advisors, data aggregators medical claim administrators, pharmacy benefit managers, and employee assistance program vendors to:
 - Identify members with opioid dependence
 - Refer members to care teams to optimize pain management control with providers
 - Investigate potential fraud and abuse cases, when necessary.
 - Evaluating their coverage policies for Hepatitis C treatment to address individuals with a history of substance abuse. For example, some policies require substance abuse remission for at least 6 months for the plan to pay for the Hepatitis C treatment.

¹ <https://www.webmd.com/hepatitis/hepc-guide/hepatitis-c-cause>